

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022623

FILED
Apr 08, 2004
Secretary of State

Entity Name: ALLIED BUSINESS CAPITAL, INC.

Current Principal Place of Business:

2859 N.E. 60TH STREET
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

2933 N. W. 9TH AVENUE
WILTON MANORS, FL 33311

Current Mailing Address:

2859 N.E. 60TH STREET
FORT LAUDERDALE, FL 33308

New Mailing Address:

2933 N. W. 9TH AVENUE
WILTON MANORS, FL 33311

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

ZITO, JOHN
2933 N. W. 9TH AVENUE
WILTON MANORS, FL 33311 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN ZITO

04/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ZITO, JOHN
Address: 2859 N.E. 60TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ZITO, JOHN
Address: 2933 N. W. 9TH AVENUE
City-St-Zip: WILTON MANORS, FL 33311

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN ZITO

PSTD

04/08/2004

Electronic Signature of Signing Officer or Director

Date